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								Application or Docket Number					
	PATENT A												
Effective October 1, 2000								740184-150					
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
<b></b>			(Column 1)		(Column 2)		TYP	TYPE		OR SMALL ENTITY		ENTITY	
TOTAL CLAIMS			8				R	ATE	FEE	- 1	RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE 3		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			@ minus 20=		*		X	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		X40=			OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT				+135=			OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TC	TAL		OR	TOTAL	71 ()	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	(Column 1) (Column 2) (Column 3						SN	IALL	ENTITY	OR	SMALL E		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL- FEE	·	RATE	ADDI- TIONAL FEE	
NON	Total	•	Minuş	**		=	X	\$ <b>9</b> =	*	OR	X\$18=		
AME	Independent	*	Minus	***		=	X	40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEF			'ENDEN	ENDENT CLAIM		41	35=		OR	+270=		
								TOTAL			TOTAL		
1							ADDI	T. FEE		lon,	ADDIT. FEE		
		(Column 1) CLAIMS		(Colur HIGH	HEST	(Column 3)			ADDI-	1 [		ADDI-	
MENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	R/	ATE	TIONAL FEE	7. T	RATE	TIONAL FEE	
Ş	Total	+	Minus	**		=	X	\$ <b>9</b> =		OR	X\$18=		
AMENDA	Independent	*	Minus	***	: 4114		X	40=	to specimen	OR	X80=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	'ENDEN	CLAIM		+1	35=		OR	+270=		
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)							1. FEE	<u> </u>	,	AUDII. I LL	<u> </u>	
6		CLAIMS REMAINING		HIGH	HEST MBER				ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT		PREVI	OUSLY	PRESENT EXTRA	R.	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=	ï	
	Independent	*	Minus	***		=	X	—-— 40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del> </del>	OR			
							+1	35=	<u> </u>	OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
"	"If the "Highest Nu The "Highest Nur	umber Previously P mber Previously Pa	'aid For" IN TH aid For" (Total c	IS SPACE or Independ	is less the dent) is th	an 3, enter "3." e highest number				x in co	lumn 1.		